## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 04/26/2006

## **Provider Inspection Summary**

For the period 04/01/2003 to 03/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: RIVERVIEW VILLAGE (0009599)

Address: W176 N9430 RIVER CREST DR, MENOMONEE FALLS, WI 53051

**License Status: REGULAR** 

Licensed/Certified/Registered 12/01/2002

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey	History
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Survey ID: 0094830 End Date: 05/13/2005 Type: OTHER Purpose: VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094597 End Date: 03/29/2005 Type: OTHER Purpose: DESK REVIEW

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10009100 Served 04/22/2005

Deficiencies Cited Subject Area Verified Corrected

Compliance

Compliance

50.065(6)(b) CREDENTIALED CAREGIVERS 05/13/2005 Yes

Survey ID: 0092424 End Date: 03/25/2004 Type: OTHER Purpose: SELF REPORT

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10008688 Served 04/28/2004

Deficiencies Cited Subject Area Verified Corrected

13.05(2) CLIENT PROTECTION

Survey ID: 0091976 End Date: 01/22/2004 Type: OTHER Purpose: COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Compliance

STATE OF WISCONSIN
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P.O. Box 2969
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Survey ID: 0090388 End Date: 05/15/2003 Type: OTHER Purpose: SELF REPORT

**Results:** STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006782 Served 06/04/2003

Deficiencies CitedSubject AreaVerifiedCorrected83.14(4)TRAINING PLAN BY CBRF08/06/2003Yes83.21(4)(w)SAFE ENVIRONMENT08/06/2003Yes

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**Enforcement History** 

Date: 04/19/2005 SOD #10009100 Appealed: No

**Sanctions** 

COMPLY WITH REQUIREMENT

Date: 04/27/2004 SOD #10008688 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

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